Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10,635,819

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							1	RATE	FEE		RATE	FEE	
FOR 45			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OB	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			45 minus 20=		* 25			l					
INDEPENDENT CLAIMS					*			X\$ 9=		OR	X\$18=	450	
_		DENT CLAIM PI	minus 3 = {					X42=		OR	X84=	672	
IVIO		DENT CLAIM FI	TESENT					+140=	,	OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	1.872	
CLAIMS AS AMENDED - PART II								OTHER THAN					
	· . · · · · · · · · · · · · · · · · · ·	(Column 1)	Fig. 1. January 1991	(Colur		(Column 3)				OR	SMALLI	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		#		X\$ 9=		OR	X\$18=	;	
ME	Independent	*	Minus	***		=		X42=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA							4.40			.000		
1,6,12,17,2),24,27,31,37,4								+140= TOTAL		OR	+280= TOTAL		
	낙5, (Column 1) (Column 2) (Column 3)							ADDIT. FEE	_	OR	ADDIT. FEE		
		1 .			ı ı								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	CLAIM		J	+140=		OR	+280=		
								TOTAL		OR	TOTAL		
	(0-1									JON	ADDIT. FEE		
		(Column 1) CLAIMS		(Colui		(Column 3)	7 ,			l			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
\ME	Independent	*	Minus	***		=		X42=			X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM]	7.12		OR			
* If the entry in column 1 is less than the entry in column 0 write "0" in column 2										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
		imber Previously Pa nber Previously Pa					er fo	und in the app	oropriate box	k in co	olumn 1.		